§1 C.17:48-6n §2 C.17:48A-71 §3 C.17:48E-35.11 §4 C.17B:26-2.11 §5 C.17B:V-46.1m §6 C.26:2J-4.11

P.L.1995, CHAPTER 331, approved January 5,1996

1995 Senate No.1759 (Fourth Reprint)

AN Acr concerning health insurance coverage for treatment of diabetes and supplementing various parts of the statutory law.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersev:

1. a. Every individual or group hospital service corporation contract providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to P.L.1938, c.366 (C.17:48-1 et seq.) or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act shall provide benefits to any subscriber or other person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician IQt nurse practitioner/clinical nurse specialist: blood glucose monitors and blood glucose monitors for the legally blind; 4[data management systems;]4 test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.

b. Each individual or group hospital service corporation contract shall also provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a physician lor nurse practitioner/clinical nurse specialist of a significant change in the subscriber's or other covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician lor nurse practitioner/clinical nurse specialist that reeducation or refresher

EXPLANATION--Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter

Matter enclosed in superscript numerals has been adopted as follows:

I Senate SHH committee amendments adopted May 8, 1995

² Senate floor amendments adopted May 11,1995.

J Senate floor amendments adopted June 12, 1995

⁴ Assembly AIN committee amendments adopted November 20, 1995.

education is necessary. 2Diabetes self-management education shall be provided bX 3 i ti i r i ter n ti n II re nize r fi i nal association of dietitians or a health care professional recognized as a Certified Diabetes Educator bX the American Association of Diabetes Educators 4or a registered pharmacist in the State Qualified with regard to management education for diabetes bX anx institution recognized bX the board ofpharmacx of the State of New Jersex4.,2

- c. The benefits required by this section shall be provided to the same extent as for any other sickness under the contract.
- d. This section shall apply to all hospital service corporation contracts in which the hospital service corporation has reserved the right to change the premium.
- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
- f. The Commissioner of Insurance may, in consultation with the Commissioner ofHealth, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-l et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.
- 2. a. Every individual or group medical service corporation contract providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to P.L.1940, c.74 (C.17:48A-l et seq.) or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act shall provide benefits to any subscriber or other person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician I.Q! nurse-practitioner/clinical nurse-specialist I: blood glucose monitors and blood glucose monitors for the legally blind; 4[data management systems;]4 test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.
- b. Each individual or group medical service corporation contract shall also provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a physician <u>lor nurse practitioner/clinical nurse specialistl</u> of a significant change in the subscriber's or other covered person's

symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician <u>lor nurse practitioner/clinical nurse specialisf</u> that reeducation or refresher education is necessary. <u>2Diabetes self-mana£ement education shall be provided by 3</u> ietitian re istered nati nall reco ized rofe si nal <u>association of dietitians o~ a health care professional reco£nized as a</u>

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- c. The benefits required by this section shall be provided to the same extent as for any other sickness under the contract.
- d. This section shall apply to all medical service corporation contracts in which the medical service corporation has reserved the right to change the premium.
- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
- f. The Commissioner of Insurance may, in consultation with the Commissioner ofHealth, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-l et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.
- 3. a. Every individual or group health service corporation contract providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to P. L.1985, c.236 (C.17:48E-l et seq.) or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act shall provide benefits to any subscriber or other person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician lor nurse practitioner/clinical nurse specialisf: blood glucose monitors and blood glucose monitors for the legally blind; 4[data management systems;]4 test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.
- b. Each individual or group health service corporation contract shall also provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon the diagnosis by a physician lor nurse practitioner/clinical nurse specialisf of a significant change in the subscriber's or other covered person's

symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician <u>lor nurse practitioner/clinical nurse specialist</u> that reeducation or refresher education is necessary .2Diabetes self-management education shall be provided by 3 di .i re i ter a na i n II rec r fe ional <u>association of dietitians o~ a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators 4 or a registered pharmacist in the State Qualified with regard to mana men ed a i n ti r dia te n in ti uti n r the <u>board of pharmacy of the State of New Jersey4.2</u></u>

- c. The benefits required by this section shall be provided to the same extent as for any other sickness under the contract.
- d. This section shall apply to all health service corporation contracts in which the health service corporation has reserved the right to change the premium.
- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
- f. The Commissioner of Insurance may, in consultation with the Commissioner ofHealth, pursuant to the" Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.
- 4. a. Every individual health insurance policy providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to Chapter 26 of Title 17B of the N ew J ersey Statutes or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act shall provide benefits to any person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician <u>lor nurse practitioner/clinical nurse specialist</u>: blood glucose monitors and blood glucose monitors for the legally blind; 4[data management systems;]4 test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.
- b. Each individual health insurance policy shall also provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a physician lor nurse practitioner/clinical nurse specialist of a significant change in the covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician lor nurse

<u>practitioner/clinical nurse specialist</u> that reeducation or refresher education is necessary. <u>2Diabetes self-mana!!ement education shall be provided by Ja dietitian registered by a nationally recognized professional association of <u>dietitians or a health care professional recognized as a</u></u>

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- c. The benefits required by this section shall be provided to the same extent as for any other sickness under the policy.
- d. This section shall apply to all individual health insurance policies in which the insurer has reserved the right to change the premium.
- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
- f. The Commissioner of Insurance may, in consultation with the Commissioner ofHealth, pursuant to the" Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-I et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section
- 5. a. Every group health insurance policy providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to Chapter 27 of Title 17B of the New Jersey Statutes or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act shall provide benefits to any person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician lor nurse practitioner/clinical nurse specialist: blood glucose monitors and blood glucose monitors for the legally blind; 4[data management systems;]4 test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.
- b. Each group health insurance policy shall also provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a physician lor nurse practitioner/clinical nurse specialistl of a significant change in the covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician lor nurse practitioner/clinical nurse specialist that reeducation or refresher education is necessary <a href="https://doi.org/10.100/journal.org/10.10

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- c. The benefits required by this section shall be provided to the same extent as for any other sickness under the policy.
- d. This section shall apply to all group health insurance policies in which the insurer has reserved the right to change the premium.
- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c,162 (C.17B:27A-17 et seq.).
- f. The Commissioner of Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-l et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.
- .6. a. Every I[enrollee agreement providing] <u>contract for</u> health care services that is delivered, issued, executed or renewed in this State pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.) or approved for issuance or renewal in this State on or after the effective date of this act shall provide health care services to any enrollee or other person covered thereunder for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a <u>Iparticipatingl</u> physician I.QI <u>4participating4</u> nurse <u>practitioner/clinical nurse specialist:</u> blood glucose monitors and blood glucose monitors for the legally blind; 4[data management systems;]4 test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.
- b. Each I [enrollee agreement] contract shall also provide health care services for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Health care services provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a ll2articil2ating1 physician I.QI 4particil2ating4 nurse practitioner/clinical nurse specialist of a significant change in the enrollee's or other covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a ll2articipating1 physician I.QI 4participating4 nYm l2ractitioner/clinical nurse specialist that reeducation or refresher education is necessary. 2Diabetes self-management education shall be l2rovided bX 3~ 4participating4 dietitian registered bX a nationallx recognized professional association of dietitians o~ a health care f)rofp~~inn~' recognizer111s 11 ('ertifi~rl ni~hetes Rrlllc11tnr hy the Americ11n

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- c. The health care services required by this section shall be provided to the same extent as for any other sickness under the 4[enrollee agreement] contract4.
- d. This section shall apply to all 1 [enrollee agreements] <u>contractsl</u> in which the health maintenance organization has reserved the right to change the schedule of charges.
- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
- f. The Commissioner of Insurance may, in consultation with the Commissioner ofHealth, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-l et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.
 - 7. This act shall take effect immediately.

Requires health insurers to provide coverage for diabetes self-management education, equipment and supplies.

SPONSOR'S STATEMENT

STATEMENT

This bill requires hospital service corporations, medical service corporations, health service corporations, commercial individual and group health insurers and health maintenance organizations to provide benefits for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician: blood glucose monitors and blood glucose monitors for the legally blind; data management systems; test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.

The bill also provides that health insurers shall provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes, upon significant change in a covered person's symptoms or conditions which necessitate changes in that person's self-management, and upon the need for reeducation or refresher education.

Nationwide studies indicate that access to self-management education, equipment and supplies can result in cost savings for hospitalization and treatment of diabetes. Studies also indicate that inadequate reimbursement creates a major impediment to high quality care for persons with diabetes. Despite recent advances in the treatment and monitoring of this disease which allow a person with diabetes to live a near normal and productive life, many persons are often unable to comply with optimal programs of treatment because they cannot afford the cost of supplies, equipment, education or treatment. This bill would require reimbursement by health insurers for diabetes self-management education, equipment and supplies.

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SENATE HEALTH COMMITTEE

STATEMENT TO

SENATE, No.1759

with committee amendments

STATE OF NEW JERSEY

DATED: MAY 8,1995

The Senate Health Committee favo~ably reports Senate Bill No.1759 with committee amendments.

As amended by committee, this bill requires hospital, medical and health service corporations, commercial individual and group health insurers and health maintenance organizations to provide benefits for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician or nurse practitioner/clinical nurse specialist: blood glucose monitors and blood glucose monitors for the legally blind; data management systems; test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar .

The bill also provides that health insurers shall provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes, upon significant change in a covered person's symptoms or conditions which necessitate changes in that person's self-management, and upon the need for reeducation or refresher education.

Nationwide studies indicate that access to self-management education, equipment and supplies can result in cost savings for hospitalization and treatment of diabetes. Studies also indicate that inadequate reimbursement creates a major impediment to high quality care for persons with diabetes. Despite recent advances in the treatment and monitoring of this disease which allow a person with diabetes to live a near normal and productive life, many persons are often unable to comply with optimal programs of treatment because they cannot afford the cost of supplies, equipment, education or treatment.

The committee amended the bill to include nurse practitioners/clinical nurse specialists, in addition to physicians. as practitioners who can

recommend or prescribe the services and equipment and supplies related to diabetes. Other amendments are technical and clarify terminology with respect to health maintenance organizations.

STATEMENT TO SENATE FLOOR AMENDMENTS

STATEMENT

This bill requires health insurers to provide benefits for expenses incurred for certain equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician or nurse practitioner/clinical nurse specialist. The bill also requires health insurers to provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition.

In order to ensure that the self-management education is provided in a consistent, high quality manner, these amendments specify that diabetes self - management education shall be provided by a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators.

STATEMENT TO SENATE FLOOR AMENDMENTS

STATEMENT

This bill requires that health insurers provide coverage for diabetes self management education and specifies that this education shall be provided by a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators.

The amendments add that this education may also be provided by a dietitian registered by a nationally recognized professional association of dietitians.

ASSEMBL y INSURANCE COMMITTEE

STATEMENT TO

[THIRD REPRINT] SENATE, No.1759

with committee amendments

STATE OF NEW JERSEY

DATED: NOVEMBER 20,1995

The Assembly Insurance Committee reports favorably and with committee amendments, Senate, No.1759 (3R).

As amended by the committee, this bill requires hospital, medical and health service corporations, commercial individual and group health insurers and health maintenance organizations to provide benefits for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician or nurse practitioner/clinical nurse specialist: blood glucose monitors and blood glucose monitors for the legally blind; test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.

The bill also requires health insurers to provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes, upon significant change in a covered person's symptoms or conditions which necessitate changes in that person's self-management, and upon the need for reeducation or refresher education.

Nationwide studies indicate that access to self-management education, equipment and supplies can result in cost savings for hospitalization and treatment of diabetes. Studies also indicate that inadequate reimbursement creates a major impediment to high quality care for persons with diabetes. Despite recent advances in the treatment and monitoring of this disease which allow a person with diabetes to live a near normal and productive life, many persons are often unable to comply with optimal programs of treatment because they cannot afford the cost of supplies, equipment, education or treatment.

The committee amended the bill to delete the reference to data

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management systems as a reimburseable benefit and to provide that diabetes self-management education shall be provided by registered pharmacists in the State qualified with regard to management education for diabetes by any institution recognized by the board of pharmacy of the State of New Jersey in addition to dietitians registered by a nationally recognized professional association of dietitians and health care professionals recognized as Certified Diabetes Educators by the American Association of Diabetes Educators.

As released by the committee, this bill is identical to Assembly, No. 2878 (IR).